

INTERIM

Suggested Format for Awarding Body that enforces its own Labor Compliance Program for all projects (Labor Code §1771.5(a))

Report for the reporting period 2/1/2010 to 6/30/2010 INTERIM REPORT
(mm/dd/yyyy) (mm/dd/yyyy)

1. Name of Labor Compliance Program (LCP) : Rocklin Unified School District		
2. LCP I.D. Number (assigned by DIR): 2004.00391	3. Date of Initial Approval: February 10, 2004	
4. Contact person (include name, title, address, telephone, fax, and e-mail, if available): Linda Taylor Admin. Assistant Rocklin Unified School District 2615 Sierra Meadows Drive Rocklin, CA 95677 Ph: 916 630 3188 Fax: 916 624 7246 Email: ltaylor@rocklin.k12.ca.us		
5. Did LCP perform any LC § 1771.5 enforcement activities during the XX months in the reporting period? Please check one: <input checked="" type="checkbox"/> Yes If Yes, proceed to item 6 on the next page <input type="checkbox"/> No If No, complete the information below, sign the form and submit to DIR, Office of the Director, Attn: LCP Special Assistant, 455 Golden Gate Avenue, 10th Floor, San Francisco CA 94102		
What suggestions do you have for the Department of Industrial Relations to better assist you with your program in the coming year? (attach additional sheets if necessary)		
SUBMITTED BY: <u>Linda Taylor</u> Signature Linda Taylor, Admin. Assistant, Facilities Name and Title July 30, 2010 Date		

6. LC § 1771.5 enforcement activities (provide all information requested, attaching as many sheets as necessary).

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A. List projects handled by LCP within the past ~~12~~ months.

Project Name	Bid Advertisement Date	Prime Contractor	Contract Amount
Sunset Ranch Elementary School	April 27, 2007	Roebbelen Construction, Inc.	\$15,349,000.00
Total			

B. List any project subject to the limited exemption clause of LC § 1771.5(a), if applicable.

Project Name	Description of Project	Contract Amount
Total		

C. Summary of all wages and penalties assessed and/or recovered.

Project Name	Affected Contractor (who directly employed the worker)	Amount Assessed	Amount Recovered	Approval of Forfeiture Requested from Labor Commissioner?	Description of Violation
				<input type="checkbox"/> Yes <input type="checkbox"/> No	
				<input type="checkbox"/> Yes <input type="checkbox"/> No	
				<input type="checkbox"/> Yes <input type="checkbox"/> No	
				<input type="checkbox"/> Yes <input type="checkbox"/> No	
				<input type="checkbox"/> Yes <input type="checkbox"/> No	
				<input type="checkbox"/> Yes <input type="checkbox"/> No	
				<input type="checkbox"/> Yes <input type="checkbox"/> No	
				<input type="checkbox"/> Yes <input type="checkbox"/> No	
Total					

D. For any amount identified in item C for which approval of forfeiture not requested from the Labor Commissioner, please explain below.

Project Name	Amount Assessed	Amount Recovered	Explanation
Total			

E. For any amount identified in item C for which approval of forfeiture was requested from the Labor Commissioner, please provide the following:

[illegible]

F. Identify cases that are or were the subject of LC § 1742 proceedings.

Project Name	Contractor	Nature of Violation	ODL Case #	Current Status

G. Did you refer any contractor to the Labor Commissioner for debarment per LC § 1777.1?

Please check one: ☐ Yes ☒ No

If yes, identify affected contractor(s) or subcontractor(s) and date(s) of referral:

H. Did you refer any apprenticeship violation to the Division of Apprenticeship Standards (DAS)?

Please check one: ☐ Yes ☒ No

If yes, identify affected contractor(s) or subcontractor(s) and date(s) of referral: _____